Hospital	City / Town		County	Teaching Status [1]	aching Status [1] Fiscal Year End		Number of Months Data	
Beth Israel Deaconess Hospital - Nec	edham	Needham	Norfolk	Nonteaching	09 / 30	12		
Financial Performance Indicators	FY01	FY02	FY03	FY04	FY05	MA Industry Median FY05	NorthEast US Median FY04 [2]	
Profitability Operating Margin Non-Operating Margin Total Margin Operating Surplus (Loss)	-8.15% 1.26% -6.89% (\$1,834,321)	0.88% -6.76%	0.05% -4.63%	0.00% 2.89%	-0.02% 0.00% -0.02% (\$8,334)	1.70% 1.25% 3.24%	not available	
Total Surplus (Loss)	(\$1,550,321)	, ,	, ,		(\$8,334)			
<b>Liquidity</b> Current Ratio Days in Accounts Receivable Average Payment Period	0.73 35.69 44.14	47.90	52.08	36.46	0.82 38.84 65.74	1.58 41.79 51.91	49.17	
Solvency/Capital Structure Debt Service Coverage (Total) [3] Cashflow to Total Debt [4] Equity Financing	66.04%	60.32%	63.74%	61.23%	64.60%	3.23 17.53% 41.74%	16.38%	
Other Total Net Assets Assets Whose Use is Limited Net Patient Service Revenue [5]	\$9,511,000 \$0 \$21,845,002	\$628,000	\$810,000	\$2,817,299	\$13,117,073 \$3,535,760 \$33,399,743	 	  	

## FY05 filing based on hospital's audited financial statements

- Notes:
  [1] According to the Medicare Payment Advisory Commission (MEDPAC), a major teaching hospital is one with at least 25 FTE residents per 100 inpatient beds.
  [2] NE US Median data from The "2006 Almanac of Hospital Financial & Operating Indicators." The Center for Healthcare Industry Performance Studies (CHIPS)/St. Anthony/Medicode INGENIX.
  [3] Blank values indicate a facility with no current long term debt in the period covered.
  [4] Blank values indicate a facility with no long term debt net of current portion in the period covered.
  [5] Net Patient Service Revenue includes Premium Revenue.

Data Sources: FY01 data is drawn from DHCFP-403 Cost Report, Schedule 23. FY02 - FY05 data drawn from DHCFP annual filing.

CAVEATS: FY01 - FY02 data is unaudited but reviewed by the Division for consistency with the Audited Financial Statements. FY03-05 data is reconciled to Audited Financial Statements. DHCFP filings may not reflect all of the financial resources available to the hospital resources available through associations with foundations or parents/affiliates. Financial information must be interpreted within the context of other factors, including, but not limited to, management plans, reimbursement changes, market behavior, and other factors affecting performance.

Comments: Hospitals may also submit comments which further explain or clarify specific data items. Any such disclosures are shown below.